

Reference Services and Instruction

Rebecca Graff, Col. Ed.

Getting Started with Trauma-Informed Reference Consultations

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Introduction

Every day, patrons visiting their library bring with them unique personal traits and histories that inevitably impact their experience. Many of these characteristics are invisible to the library employees they interact with, sometimes resulting in misunderstandings about the patron's needs, motivations, or library knowledge. Accidentally retraumatizing patrons during their library visit is a particular concern.

Unfortunately, trauma is considered a common experience and "has no boundaries regarding age, gender, socioeconomic status, race, ethnicity, or sexual orientation."¹ In addition to traumatic events experienced individually, there are many causes of trauma that distinctively affect whole communities or generations, such as epidemics, war, or discrimination. Considering the impact of trauma on library patrons, taking steps to prevent retraumatization is more important now than ever.

Awareness about trauma-informed pedagogy is increasing in the field of education and is also gaining ground in library instruction, but recommended practices have largely focused on a traditional classroom setting. Recommendations mostly avoid other teaching and learning contexts, such as one-on-one reference consultations. This article will propose practical recommendations for implementing a trauma-informed approach during reference consultations, leading to a more impactful and positive learning experience for trauma survivors.

What Does It Mean to Be Trauma Informed?

Trauma-informed approaches began in 2001 when two clinical psychologists, Maxine Harris and Roger Fallot, published a book outlining a new concept called "trauma-informed service systems" and proposed new care practices designed for patients with histories of trauma. In this context, the definition of trauma is quite broad. Trauma can refer to either a single event or a series of events that physically or emotionally harm someone or is life threatening, which has a prolonged negative impact on that person's physical or mental well-being.² Trauma can negatively impact the survivor's sensorimotor skills, empathy response, attention, memory, or executive functioning skills.³ Trauma impacts everyone uniquely, even when the trauma is shared with others, such as with generational trauma or racial trauma.⁴

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Trauma-informed approaches acknowledge that a trauma survivor will “construct a new theory of how the world works and how people behave.”⁵ The ultimate goal of a trauma-informed approach is to “return a sense of control and autonomy” to the trauma survivor by teaching them healthy coping strategies and developing a plan for how to deal with future crises.⁶ This goal can be directly applied to reference consultations; librarians can teach patrons research strategies that can be used independently in the future.

Any organization in any discipline can implement a trauma-informed approach by understanding the impact of trauma, promoting safety, empowering individuals by giving them agency, and proactively preventing retraumatization.⁷ The six key principles that comprise a trauma-informed approach developed by the Substance Abuse and Mental Health Services Administration (SAMHSA) include:

1. **Safety:** Participants and staff feel physically and psychologically safe.
2. **Peer support:** Peer support and mutual self-help are key as vehicles for establishing safety and hope, building trust, enhancing collaboration, and utilizing their lived experience to promote recovery and healing.
3. **Trustworthiness and transparency:** Organizational decisions are conducted with the goal of building and maintaining trust with participants and staff.
4. **Collaboration and mutuality:** Importance is placed on partnering and leveling power differences between staff and service participants.
5. **Cultural, historical, and gender issues:** Culture and gender-responsive services are offered while moving beyond stereotypes/biases. (Author note: As of February 8, 2026, this principle was removed from SAMHSA’s list of key principles.)
6. **Empowerment, voice, and choice:** Organizations foster a belief in the primacy of the people who are served to heal and promote recovery from trauma.⁸

Applying Trauma-Informed Principles to Reference Consultations

Trauma-informed teaching and learning (TITL) is an umbrella term coined by Janice Carello, a college educator with a master’s in social work and a doctorate in social welfare, to denote trauma-informed approaches to the delivery of the college curriculum.⁹ Drawing on inspiration from Harris and Fallot’s concepts of trauma-informed care and SAMHSA’s guidance for trauma-informed approaches, she adapted the six key principles to a trauma-informed approach for classroom and college settings and developed an additional seventh principle. Her TITL principles are¹⁰:

1. **Physical, emotional, social, and academic safety:** Efforts are made to create an atmosphere that is respectful of the need for safety, respect, and acceptance for both individual and group interactions, including feeling safe to make and learn from mistakes.
2. **Trustworthiness and transparency:** Trust and transparency are enhanced by making expectations clear, ensuring consistency in practice, maintaining appropriate boundaries, and minimizing disappointment.
3. **Support and connection:** Individuals and groups are connected with appropriate peer and professional resources to help them succeed academically, personally, and professionally.
4. **Collaboration and mutuality:** Opportunities exist to provide input, share power, and make decisions. Individuals and groups act as allies rather than as adversaries to reach common goals.
5. **Empowerment, voice, and choice:** Individuals and groups are empowered to make choices and to develop confidence and competence.

6. **Social justice:** Individuals and groups strive to be aware of and responsive to forms of privilege and oppression in order to respect one another's diverse experiences and identities.
7. **Resilience, growth, and change:** Strengths and resilience are emphasized over deficiencies and pathology. Feedback is provided to convey optimism and to facilitate growth and change.

Carello designed her principles to be applied in "classroom, department, and college-wide settings."¹¹ However, they can be applied to an even greater range of teaching and learning contexts such as one-on-one learning experiences like tutoring, and they can be applied in any location where teaching and learning transpires, such as libraries.

Reference is a core service provided by most libraries, and consultations in particular offer a unique opportunity for patrons to learn from a librarian. Using Carello's TITL principles as a framework, and informed by two of American Library Association's guiding documents for reference professionals, the *Guidelines for Behavioral Performance of Reference and Information Service Providers* and the *Professional Competencies for Reference and User Services Librarians*, the following recommendations can be applied to reference consultations.¹² These recommendations can be implemented by individual librarians, although organizational support from library leadership would certainly advance these principles even further. This list is not exhaustive and should serve as a starting point for thinking about trauma-informed consultations.

1. Physical, emotional, social, and intellectual safety

- a. Clear information is provided in advance about when, where, and how to meet for the consultation.
- b. The consultation occurs in an accessible and inclusive environment. The environment is periodically examined for physical and psychological safety concerns; alternative locations should be explored and offered if needed.
- c. The librarian is welcoming and nonjudgmental.
- d. The librarian acknowledges noticeable emotions experienced by the patron and considers how those emotions or their cause may impact the consultation, and then responds appropriately.
- e. The librarian considers factors that may make a patron unlikely to schedule a consultation, such as researching sensitive topics or personal reasons, and works with colleagues to brainstorm how to proactively communicate information safely and confidentially.

2. Trustworthiness and transparency

- a. All efforts are made to protect the privacy and confidentiality of the patron's identity, the nature of their information need, and any services or resources discussed or recommended.
- b. The librarian explains their thought process as they consider the information needed and begin to problem solve; they are forthcoming and open when responding to clarifying questions from the patron.
- c. The librarian maintains professional boundaries, clearly and directly setting appropriate expectations for the scope of the consultation service.

3. Support and connection

- a. The librarian connects the patron with high-quality resources that are best suited to address their information need and explains the reasoning for their selection.

- b. The librarian is prepared to connect the patron with subject-expert librarians, local organizations, licensed professionals, or other experts who are best equipped to help the patron with their specific need.

4. Collaboration and mutuality

- a. The librarian asks clarifying questions to fully understand the patron's information need.
- b. The librarian invites the patron to be a collaborator during the consultation by offering additional input and suggesting new ideas.
- c. The librarian avoids using library jargon, opting to use descriptive, natural language instead.

5. Empowerment, voice, and choice

- a. The consultation occurs in the offered modality preferred by the patron.
- b. The librarian offers the patron skill-building opportunities and information that they can use independently in the future if they have a similar information need.
- c. The librarian invites the patron to provide feedback about their consultation experience and reflects on suggestions for improvement.

6. Social justice

- a. The librarian learns about social justice issues such as bias, stereotyping, microaggressions, antiracist practices, and censorship.
- b. The librarian exhibits cultural and intellectual humility and avoids making assumptions about the patron.
- c. The librarian learns about the community they serve and reviews if delivery of consultations is equitable for all, making changes when able.

7. Resilience, growth, and change

- a. The librarian suggests that the patron actively participate during the consultation, such as encouraging the patron to perform some searches, decide if they would prefer to further develop expertise using their preferred resource or learn to use a new one, and determine if their information need has been met before the end of the scheduled meeting time. If the patron declines this level of participation, the librarian respects and accepts their decision.
- b. The librarian suggests new or different aspects of the patron's information need that they may have overlooked, such as reflecting on the impact of their regular processes and strategies, considering resource bias and credibility, searching for opposing sources, and determining unconventional but legitimate strategies or resources.
- c. The librarian frequently checks in with the patron to see if their needs are being met or if alternate methods should be considered.

Benefits and Limitations of Trauma-Informed Consultations

There are many benefits to implementing a trauma-informed approach to consultations. It is, at its core, strengths based.¹³ The patron is empowered during the consultation to express their voice and make their own choices, minimizing the power imbalance. There is a special focus on skill building and equipping the patron to independently solve similar problems in the future.

Trauma-informed approaches also complement equity-centered approaches. A lack of equity will cause or worsen trauma, and existing systems are not naturally designed to be equitable for trauma survivors.¹⁴ For example, a trauma survivor may have a fear of driving and not often leave their home. Offering consultations that can occur remotely makes reference service more equitable not just for that trauma survivor, but for any patron who cannot easily get to the library's physical location.

Culturally responsive approaches also work in tandem with trauma-informed approaches. As a librarian gets to know what various cultures comprise the community they serve, the librarian should proactively learn about social customs, local cultural history, and sociopolitical contexts. This knowledge can inform both logistics and social aspects of the consultation, and the librarian can work to ensure a "socially, emotionally, and intellectually" safe environment for the consultation to occur.¹⁵ The trauma-informed librarian will also display cultural humility, recognizing that the patron's experiences are different and may not be fully understood by the librarian.¹⁶

Employing a trauma-informed approach to consultations does have some challenges. The goal of this article is to equip individual librarians to make some practical, realistic changes to their consultations. However, that unfairly places the onus on individual librarians to take the initiative to learn about trauma, to find time to do this work, and to have a certain amount of agency to thoughtfully consider the impact of changes to their consultations. Support from library leadership would allow for a more coordinated organizational approach by conducting a holistic review of library policies, services, and resources from a trauma-informed lens.

Another challenge is maintaining healthy boundaries. Patrons who find a librarian to be safe, trustworthy, and supportive may become repeat customers, finding comfort and security in spending time with the librarian. The librarian, who is likely to have a helping predisposition, may also find satisfaction in successful consultations with the patron. This kind of situation can easily lead to the patron viewing the librarian as a confidante, and they may open up about their mental health and trauma. Librarians should remain alert and cognizant of when a patron starts taking up too much time, is not appropriately using the consultation service, or if the nature of their need requires a licensed expert. The librarian should compassionately yet clearly define the boundaries of their service and connect the patron to the appropriate services or experts.¹⁷

Further Learning and Conclusion

This article provides a high-level overview of trauma-informed approaches and makes some practical recommendations for trauma-informed consultations. Librarians who are interested in diving deeper into trauma-informed approaches may find the following resources to be particularly useful to start:

- Janice Carello's *Trauma-Informed Teaching and Learning* blog: <https://traumainformedteaching.blog/>
- *ACRL's Keeping Up With . . . Trauma-Informed Pedagogy* (2021) by Desirae Zingarelli-Sweet: https://www.ala.org/acrl/publications/keeping_up_with/trauma-informed-pedagogy
- *A Trauma-Informed Approach to Library Services* (2020) by Rebecca Tolley: <https://alastore.ala.org/tiservices>

While it might seem overwhelming to get started with this work, even taking small steps toward a trauma-informed approach can have a large and positive impact. It is also important to keep in mind that librarians do not need to know which patrons have experienced trauma. These practices are

universally beneficial.¹⁸ With a trauma-informed approach to consultations, trauma survivors can experience the library as a welcoming environment where they are encouraged to independently explore, grow, and build their confidence to persevere.

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